| BARBARA J. Myer | State Bd. of E. | L. 3 |
|--------------------------|-----------------|--------------------------|
| Candidate's Name (print) | Office | District (if applicable) |

Contributions in Excess of \$100 or, When Added Together Exceed \$100

| CONTRIBUTOR'S NAME AND ADDRESS | DATE(S) OF EACH CONTRIBUTION | AMOUNT OF EACH CONTRIBUTION(S) | CHECK / IF LOAN | CHECK / IF IN KIND |
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Sandidate's Name (print)

State Sol of El
District (if applicable)

Contributions of \$100 or less

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Candidate's Name (print) Office District (if applicable)

Expenses Categories

| CATEGORIES | o CODE | TOTALS |
|--|--------|--------|
| Office expenses | A | |
| Expenses related to volunteers | В | |
| Expenses related to travel | С | |
| Expenses related to advertising | D | |
| Expenses related to paid staff | E | |
| Expenses related to consultants | F | |
| Expenses related to polling | G | |
| Expenses related to special events | Н | \$ 15 |
| Goods and services provided in kind for which money would otherwise have been paid | I | |
| Other miscellaneous expenses | J | |

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|--------------------------|--------|--------|-------|--------------------------|
| Candidate's Name (print) | 7 | Office | | District (if applicable) |

Expenses in Excess of \$100

| NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE | CATEGORY | DATE(S) OF EACH EXPENSE | AMOUNT(S) OF EACH EXPENSE |
|--|---------------------------------------|----------------------------|------------------------------|
| EXPENSE(S) | · · · · · · · · · · · · · · · · · · · | | |
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| Candidate's Name (print) | 7 | Office | District (if applicable) | |

Expenses of \$100 or Less

| DATE OF EACH EXPENDITURE | EXPENDITURE | CATEGORY | DATE OF EACH | AMOUNT OF EACH EXPENDITURE | CATEGORY |
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